

DOCUMENT RESUME

ED 428 153

UD 032 829

TITLE Ten Ways Community Organizations Can Link Children to Medicaid (and Other Public Health Insurance Programs).
INSTITUTION Center on Budget and Policy Priorities, Washington, DC.
REPORT NO HN0026
PUB DATE 1998-00-00
NOTE 9p.
AVAILABLE FROM Web site: <http://www.cbpp.org>
PUB TYPE Reports - Descriptive (141)
EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Child Health; Children; *Community Organizations; Elementary Secondary Education; Eligibility; *Health Insurance; *Information Dissemination; Outreach Programs; *Partnerships in Education; *School Community Relationship; Urban Schools
IDENTIFIERS *Medicaid

ABSTRACT

Ten ways community organizations, which may include schools, can link children to Medicaid and other public health insurance programs are listed. They are: (1) disseminate information about the availability of health insurance for children in low-income families; (2) incorporate Medicaid income eligibility screening as part of the program's routine intake procedure; (3) work to make a facility a Medicaid outstation or arrange for visits from Medicaid enrollment workers; (4) conduct Medicaid outreach at special events and in unexpected settings; (5) share information and assist families in applying for Medicaid during home visits; (6) establish a telephone helpline; (7) enlist the support of the business community; (8) use the media to inform the public about the availability of health insurance for children; (9) establish partnerships with schools, which are important places for information dissemination; and (10) work with other organizations and agencies to improve outreach and referral services. (SLD)

* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *

ED 428 153

Ten Ways Community Organizations Can Link Children to Medicaid (and Other Public Health Insurance Programs).

Center on Budget and Policy Priorities

PERMISSION TO REPRODUCE AND
DISSEMINATE THIS MATERIAL HAS
BEEN GRANTED BY

PS de Rynier
CBPP

TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)

1

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

☒ This document has been reproduced as
received from the person or organization
originating it.

☐ Minor changes have been made to improve
reproduction quality.

• Points of view or opinions stated in this docu-
ment do not necessarily represent official
DERI position or policy.

BEST COPY AVAILABLE

UDC32829



CENTER ON BUDGET AND POLICY PRIORITIES

Ten Ways Community Organizations Can Link Children to Medicaid (and Other Public Health Insurance Programs)

1. Disseminate information about the availability of health insurance for children in low-income families. Posters and flyers should include information about who is eligible, as well as where and how to apply. Be sure to tell families about application sites other than the welfare office. (It is increasingly important to let families know they may be eligible for Medicaid whether or not they qualify — or even apply — for cash assistance.) If your state has a short, mail-in Medicaid application, keep a supply on hand to give to families. Always provide a checklist of documents applicants must submit with their application.

2. Incorporate Medicaid income eligibility screening as part of your program's routine intake procedure. Income eligibility for one program often can "flag" eligibility for Medicaid if the income guidelines are similar. Once you identify a child likely to be eligible for Medicaid, at a minimum, refer the family to a place where an application can be submitted. Better yet, assist the family in completing a Medicaid application at the same time the family applies for other benefits, such as subsidized child care, WIC, Head Start, or energy assistance. This will be relatively easy if your state has a simple, mail-in Medicaid application.

- In Washington State — where children under age 19 are eligible for Medicaid if their family income is below 200 percent of the federal poverty line (\$27,300 per year for a family of three in 1998) — virtually all children eligible for the free and reduced-price School Lunch Program also qualify for Medicaid. The Children's Alliance of Washington, a statewide child advocacy group, worked with the state's Department of Education to design a school lunch application which includes a check-off box for parents to indicate that they would like to receive information about health insurance. Parents who check the box give permission for their names and addresses to be forwarded to the Medicaid agency. Interested families receive the state's one-page Medicaid application and information about program benefits. The application can be returned to the state Department of Medical Services in a pre-addressed, postage-paid envelope. The Children's Alliance is still working on perfecting this system and advises that for the system to reach its full potential all parties must be familiar with the procedures in place to forward information from the school to the Medicaid agency and then to the parent.

6282829

- The Child Care Resource Center in Opelika, Alabama is under contract with the state Department of Human Resources to determine eligibility for subsidized child care. To do this, staff counselors routinely ask parents about their family size and income. Since the eligibility guidelines for subsidized child care are similar to Alabama's Medicaid eligibility guidelines for children under age six, it is easy for counselors to identify children likely to qualify for Medicaid. If the child is not enrolled in Medicaid, the counselor helps the parent complete Alabama's short Medicaid application. The counselors ensure that the completed applications are delivered to the Medicaid office. (In Alabama, Medicaid applications can be mailed in and applicants do not need to have a face-to-face interview.) If a child already is enrolled in Medicaid, the counselor takes the time to discuss the importance of fully using EPSDT benefits.

3. Work with your state or local Medicaid agency to become a Medicaid outstation, or arrange for Medicaid enrollment workers to visit your facility on a regular basis.

Workers employed by the state can take applications and determine eligibility. Your own employees can be trained to conduct "initial processing" of applications — helping families complete the Medicaid application and gather the documents they need to submit along with it so that eligibility can be determined by the state agency. States can contract with community organizations to conduct such activities; Medicaid administrative funds can help cover the costs.

Be sure your Medicaid outstation site addresses the needs of applicants in your community. For example, provide child care so parents can give their attention to completing the application. Offer interpreters for applicants who speak languages other than English. Schedule hours that are convenient for working families, such as early mornings, evenings or weekends.

- Louisiana's Department of Health and Hospitals contracts with community-based organizations to become Medicaid application centers. The Regina Coeli Child Development Center in Covington operates 12 Head Start programs serving approximately 1400 children, and has staff trained and certified by the state to complete Medicaid applications. Throughout the year, Head Start staff use a variety of methods to tell families about Medicaid, including flyers and monthly newsletters. Families can make an appointment to fill out an application when they drop off or pick up their children, or at another more convenient time. Regina Coeli's costs for providing this valuable service are reimbursed by the state with Medicaid administrative funds — \$14 for each completed application.
- Staff of the Reynolds Health Center in Winston-Salem, North Carolina identified a large number of uninsured Hispanic children eligible for

Medicaid. Bilingual WIC staff and volunteers from Catholic Community Services began helping Spanish-speaking families apply for Medicaid by accompanying them to their appointments at the Medicaid office. Eventually, WIC staff persuaded the North Carolina Department of Social Services to assign a Medicaid eligibility worker to the clinic two days per week to enroll eligible children on site. All families that come to the WIC clinic are now informed of the opportunity to enroll their children in Medicaid in a familiar and convenient setting and translation services are easily provided.

4. Conduct Medicaid outreach at special events and in "unexpected" settings. Health fairs, Head Start recruitment day, kindergarten registration, community festivals, sign-ups for extra-curricular activities and summer camp, or story hour at the library offer opportunities to talk to families about health insurance for their children. Be there — any place, any time families and children are likely to gather.

- Using the theme "Make Good Health a Part of Your Future," a Head Start program in New Jersey ordered special fortune cookies from a Chinese bakery, with fortunes bearing simple health messages. The cookies were distributed along with additional information about Medicaid at a Head Start recruitment event.
- The Laguna Pueblo Division of Early Childhood, conducts an annual event called "Child Find" in seven villages. Through the Child Finds, children under age 5 receive comprehensive developmental, nutrition, medical, vision, dental and audiology screens. Children with special needs are identified and appropriate referrals are made. Flyers and posters promoting the Child Finds are distributed by members of the Laguna Interagency Coordinating Council for Young Children, as well as through schools, post offices and local merchants. A social worker from the Indian Health Service's hospital facility is on hand to assist parents who do not have health insurance in filling out New Mexico's three-page Medicaid application. In two to three weeks the social worker checks in with the family to ensure that the process has gone smoothly and to find out if the child's Medicaid eligibility has been approved.

Organizations that know their communities well also have been reaching families in some unusual settings.

- Healthy Connections, a community-based rural health outreach program in North Eastham, Massachusetts distributes flyers and conducts outreach activities in a resort community. During the summer, the organization

focuses attention on local campgrounds, but tourists are not the target of these efforts. Outreach workers know that local residents who live in vacation cottages at modest rents most of the year move into campgrounds and trailer parks during the summer months when the cottages are rented to visitors at much higher rates.

5. During home visits, share Medicaid information and assist families in applying for the program. Home visits present a special opportunity to discuss family health issues. Especially when visitors have been invited, families may be more relaxed and willing to take the time to learn about Medicaid benefits and complete application forms. Home visitors who call on Head Start families or mothers of newborns can help facilitate Medicaid enrollment. Other home visitors also can integrate Medicaid outreach into their visits: Workers in the Expanded Food and Nutrition Education Program (EFNEP) work one-on-one in the home with families to develop budgeting and food preparation skills. The Home Instruction Program for Preschool Youngsters (HIPHY) helps parents learn to read to their children. Monitors in the Child and Adult Care Food Program visit family child care providers to help them plan nutritious meals and implement proper kitchen sanitation procedures.

- The Child Health Investment Program (CHIP) of Virginia serves over 4,000 children in the state, by linking them with physicians and dentists who can assure appropriate care in a consistent setting. Home visitors are the key to the program. They help families keep doctor appointments and follow through with recommended medical treatment. At the first CHIP visit, the home visitor helps families not covered by Medicaid complete and mail in the state's two-page application. If there is a need to visit the Medicaid office or if families need help assembling required documents, the home visitor can provide transportation. One CHIP home visitor took eight mothers to Richmond to obtain official copies of their babies' birth certificates. CHIP home visitors also help families maintain their Medicaid coverage by assisting them with the recertification process. Another tip: Virginia's CHIP home visitors carry cell phones, which they can use to call the Medicaid office with questions *while* they are in a family's home helping them with the application.

6. Use a telephone helpline to encourage families to seek information about Medicaid. Existing hotlines, such as information and referral services operated by United Way, child care resource and referral agencies or local health departments, can provide information about how to obtain Medicaid benefits. In some communities special hotlines have been set up to help families complete Medicaid applications over the telephone. Follow-up calls are made in a few weeks to ensure that the process has gone smoothly or to give additional help.

- CHOICE, a nonprofit group concerned with health care issues in Philadelphia, runs both a child care line *and* a health care line. When families who call for help in finding child care also need health insurance for their children, CHOICE telephone counselors can complete an

application for either Medicaid or the state's child health insurance program while the family is on the line. Local early childhood programs also refer families to CHOICE for help in enrolling their children in Medicaid.

- The Maine Consumers for Affordable Health Care Foundation — with assistance from Pine Tree Legal Assistance — operates a toll-free HelpLine to answer questions and resolve problems for Medicaid managed care beneficiaries across the state. To help finance the HelpLine, CAHC contracts with the state Medicaid agency. Using private grant money, the organization makes a donation to the state, which then uses these funds as the non-federal share of the cost of the administrative activity — in this case, the HelpLine. The donation is matched dollar for dollar with federal Medicaid administrative funds. Joe Ditre, CAHC Foundation's director, wants to expand the function of the HelpLine to begin assisting families in enrolling their children in Medicaid and the state's forthcoming CHIP-funded child health insurance program, Cub Care. "CAHC Foundation's HelpLine works closely with the Medicaid program and has been able to do things like follow-up with Medicaid enrollees to ensure that the Medicaid managed care system is responding to their needs," explains CAHC Executive Director, Joe Ditre. "That type of assistance would be impossible without Medicaid funds. Those funds go a long way to making the system work."

7. Enlist the business community in promoting the Medicaid program. Urge local merchants who cater to families to let their customers know about the availability of health insurance for children. Successful outreach campaigns have persuaded store owners to tuck flyers into children's shoeboxes, home-delivered pizza boxes, grocery bags, toys, back-to-school notebooks and book bags. Fast food and family restaurants can print outreach messages on placemats. Utility companies may be willing to insert information in customer bills. Businesses in your community also may have employees with children eligible for Medicaid. Remember that children with private insurance may use Medicaid to cover services not covered by their private plan; also, Medicaid can help make private insurance more affordable for families by assisting with premiums and other cost-sharing.

- The Southwest Belmont Community Organization and staff from Philadelphia Citizens for Children and Youth's Child Watch project contacted 150 small business owners and managers in South Philadelphia and enlisted them in a campaign to spread the word about the availability of child health insurance programs for low-income children. All campaign materials encouraged community residents to call the Child Health Watch office for more information and for help in filling out applications over the telephone. Local restaurants and diners got placemats advertising the programs. Other stores and businesses distributed refrigerator magnets.

- Relatively few small businesses offer employees dependent coverage. "The reason," says California Small Business Association (CSBA) president Betty Jo Toccoli, "boils down to pure economics. Our biggest problem is the high cost — sticker shock." Even so, small businesses, like any other, want to attract and retain good workers. That's why so many have turned out to learn about California's new CHIP-funded Healthy Families program at "Town Hall Meetings" convened by CSBA. The Children's Partnership, a policy and strategy center, teamed up with CSBA to produce brochures describing the new health insurance program which have been distributed to CSBA's network of 100,000 local businesses. Toccoli says the information gets a positive reception since it comes from CSBA — a source members trust. This also helps reduce any stigma the government program may carry. Materials businesses receive include suggestions for helping workers obtain and complete the Healthy Families application (a form which can be used to apply for California's Medicaid program as well.) Employers also are advised to help workers by providing prompt verification of an employee's wages and income when this information is requested. CSBA and The Children's Partnership, in conjunction with their 100% Campaign partners, Children's Defense Fund and Children NOW, have exciting plans for future work together to help ensure more children of small business employees get health insurance. Meanwhile, Toccoli has been tapped to sit on the state's Healthy Families Advisory Council — as the only advisor representing non-provider business interests.

8. Use the media to inform the public about the availability of health insurance for children. Use a comprehensive strategy. Generate news articles. Encourage local radio stations to run public service announcements. Appear on radio talk shows. Don't forget about ads in shopper's guides, bus posters and billboards. Local businesses (or the media outlets themselves) may be willing to underwrite the costs of such ads.

- The Colorado Child Health Plan Program purchases some air time for advertisements about its coverage. In exchange, the program asks radio and television stations to match the amount of air time it purchases with free air time for PSAs about health insurance.
- In addition to distributing information to schools, churches and civic organizations, Ecu-Health Care, a private, nonprofit organization working to improve access to health care in the North Berkshire area of Massachusetts, now saturates the media with information on how to obtain affordable health insurance in Massachusetts. The organization generates an article in the newspaper about every two weeks and submits letters to the editor and op-ed pieces. Chip Joffe-Halpern, director of Ecu-Health Care, appears on radio talk shows and also encourages local stations to produce and broadcast PSAs. Ecu-Health Care buys newspapers ads as well, and the group also has purchased billboard space on a well-traveled road. Ecu-Health Care's efforts are paying off. In a

region where there are an estimated 1,000 uninsured children, the organization has reached some 600 families with information and help in applying for health insurance coverage for their children.

9. Partner with schools. Linking up with your local school or school district is a common-sense high impact strategy. First and foremost, schools are where the children are! Schools are often the place where the negative effects of a lack of medical attention are directly felt when teachers detect student performance problems linked with health concerns.

- New River Health Association is a federally qualified health center that operates four school-based health clinics and also provides technical assistance to other school-based clinics in elementary, middle and junior high schools across West Virginia. Clinic staff ask parents whether or not their children are eligible for free or reduced-price school meals to assess whether the children are likely to qualify for Medicaid or other state-funded health services. Staff at the in-school clinics provide the families of potentially-eligible children with a Medicaid application form and material explaining program benefits. They follow up with a phone call to offer further assistance, if necessary. New River staff maintain a good working relationship with the local Medicaid office so they can troubleshoot if there are problems.
- Every day, one of Salt lake City's Medicaid eligibility workers comes to the job at an unusual place — Edison Elementary School. The worker was placed at the school by the Utah Department of Health after the department's division of Maternal and Child Health participated in a health fair at the school and found that many of the students were suffering from untreated health conditions. The eligibility worker is available to Edison families five days a week to assist them in filling out Medicaid applications. In addition, he serves families in six other schools by conducting presentations at parent-teacher nights, communicating with school counselors and making home visits. He also has sent Medicaid information to families in four languages: English, Spanish, Bosnian and Tongan.

10. Work with other organizations and agencies to improve outreach and referral systems. Hospitals, WIC programs, schools, early childhood programs, health clinics, housing programs, food assistance programs, legal services, religious groups and others can be part of an effort to help children obtain health insurance. Work on ensuring that all child health insurance programs are coordinated and free of administrative barriers.

For more information on outreach activities, contact Donna Cohen Ross or Laura Cox at 202-408-1080.